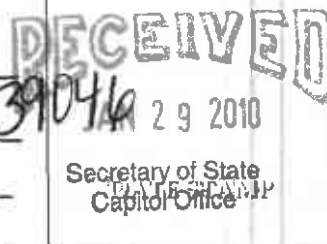


Candidate
Annual Report of Receipts and Disbursements
2009

Candidate's Name Rep. Edward Blackman, Jr.
Full Address 314 North West St., Canton, MS 39046
Telephone 601.859.1567 Fax 601.859.1311
Contact Name _____ Email _____
Office Sought State Representative Political Party Democratic



☐ Check here if above is different from previous report

TYPE OF REPORT

____ January 29, 2010 Annual Report (January 1, 2009, through December 31, 2009).....All Candidates and Political Committees

____ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$2,400.00 \$ 9,637.00	\$ 12,037.00	\$ 12,037.00
Total amount of disbursements	\$7,200.00 \$ 0	\$ 7,200.00	\$ 7,200.00
Total amount of cash on hand		\$4,837.00	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Signature of Candidate

Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO:

1. Candidates for statewide, state district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P.O. Box 136, Jackson, MS 39205 or fax to 601-359-1499 or 601-576-2819.
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Name of Candidate or Committee

Rep. Edward Blackmon, Jr.

Page

of

2 of 6

Reporting period

Jan. 1, 2009

through

Dec. 31, 2009

ITEMIZED DISBURSEMENTS

A. Full name Friends of Kenneth W. Jones	Date (Mo., Day, Year) 4/23/09	Amount of each disbursement this period \$300.00
Mailing Address Canton, MS		
City, State, Zip Code		
Purpose of Disbursement (Optional) Contribution	Aggregate Year-to-date	\$300.00
B. Full name Campaign to Elect Marshand Crisler	Date (Mo., Day, Year) 5/15/09	Amount of each disbursement this period \$1,000.00
Mailing Address Jackson, MS		
City, State, Zip Code		
Purpose of Disbursement (Optional) Contribution	Aggregate Year-to-date	\$1,000.00
C. Full name M.C. Williams	Date (Mo., Day, Year) 5/18/09	Amount of each disbursement this period \$500.00
Mailing Address Canton, MS		
City, State, Zip Code		
Purpose of Disbursement (Optional) Community Service	Aggregate Year-to-date	\$500.00
D. Full name Campaign to Elect Chokwe Lumumba	Date (Mo., Day, Year) 5/19/09	Amount of each disbursement this period \$250.00
Mailing Address Jackson, MS		
City, State, Zip Code		
Purpose of Disbursement (Optional) Contribution	Aggregate Year-to-date	\$250.00
E. Full name Edward Blackmon, Jr.	Date (Mo., Day, Year) 5/30/09	Amount of each disbursement this period \$200.00
Mailing Address Canton, MS		
City, State, Zip Code		
Purpose of Disbursement (Optional) Campaign Workers Municipal Elections	Aggregate Year-to-date	\$200.00
F. Full name Edward Blackmon, Jr.	Date (Mo., Day, Year) 6/15/09	Amount of each disbursement this period \$500.00
Mailing Address Canton, MS		
City, State, Zip Code		
Purpose of Disbursement (Optional) Campaign Workers Municipal Elections	Aggregate Year-to-date	\$500.00

Name of Candidate or Committee Rep. Edward Blackmon, Jr. Page 3 of 6
 Reporting period Jan. 1, 2009 through Dec. 31, 2009

ITEMIZED DISBURSEMENTS

A. Full name <u>Callaway Boys Basketball Team</u>	Date (Mo., Day, Year) <u>3/12/09</u>	Amount of each disbursement this period \$ <u>200.00</u>
Mailing Address <u>Jackson, MS</u>		
City, State, Zip Code <u></u>	<u> / / </u>	\$ <u> </u>
Purpose of Disbursement (Optional) <u>Contribution</u>	Aggregate Year-to-date	\$ <u>200.00</u>
B. Full name <u>Lawrence Goodwin</u>	Date (Mo., Day, Year) <u>3/17/09</u>	Amount of each disbursement this period \$ <u>700.00</u>
Mailing Address <u>Canton, MS</u>		
City, State, Zip Code <u></u>	<u> / / </u>	\$ <u> </u>
Purpose of Disbursement (Optional) <u>Community Service</u>	Aggregate Year-to-date	\$ <u>700.00</u>
C. Full name <u>Janessa Blackmon</u>	Date (Mo., Day, Year) <u> / / </u>	Amount of each disbursement this period \$ <u>700.00</u>
Mailing Address <u>Canton, MS</u>		
City, State, Zip Code <u></u>	<u> / / </u>	\$ <u> </u>
Purpose of Disbursement (Optional) <u>Community Service</u>	Aggregate Year-to-date	\$ <u>700.00</u>
D. Full name <u>Campaign to Elect Jackie Norris</u>	Date (Mo., Day, Year) <u>4/3/09</u>	Amount of each disbursement this period \$ <u>500.00</u>
Mailing Address <u>Jackson, MS</u>		
City, State, Zip Code <u></u>	<u> / / </u>	\$ <u> </u>
Purpose of Disbursement (Optional) <u>Contribution</u>	Aggregate Year-to-date	\$ <u>500.00</u>
E. Full name <u>M.C. Williams</u>	Date (Mo., Day, Year) <u>3/24/09</u>	Amount of each disbursement this period \$ <u>600.00</u>
Mailing Address <u>Canton, MS</u>		
City, State, Zip Code <u></u>	<u> / / </u>	\$ <u> </u>
Purpose of Disbursement (Optional) <u>Community Service</u>	Aggregate Year-to-date	\$ <u>600.00</u>
F. Full name <u>M.C. Williams</u>	Date (Mo., Day, Year) <u>5/2/09</u>	Amount of each disbursement this period \$ <u>500.00</u>
Mailing Address <u>Canton, MS</u>		
City, State, Zip Code <u></u>	<u> / / </u>	\$ <u> </u>
Purpose of Disbursement (Optional) <u>Community Service</u>	Aggregate Year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee

Rep. Edward Blackmon, Jr.

Page

of

Reporting period

Jan. 1, 2009

through

Dec. 31, 2009

ITEMIZED DISBURSEMENTS

A. Full name M.C. Williams	Date (Mo., Day, Year) 8/29/09	Amount of each disbursement this period \$ 750.00
Mailing Address Canton, MS		
City, State, Zip Code		
Purpose of Disbursement (Optional) Community Worker	Aggregate Year-to-date	\$ 750.00
B. Full name Committee to Elect Thurbert Baker	Date (Mo., Day, Year) 12/8/09	Amount of each disbursement this period \$ 500.00
Mailing Address P.O. Box 7396		
City, State, Zip Code Atlanta, GA 30357		
Purpose of Disbursement (Optional) Contribution	Aggregate Year-to-date	\$ 500.00
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

Page 5 of 6
 Name of Candidate or Committee Rep. Edward Blackmon, Jr.
 Reporting period Jan. 1, 2009 through Dec. 1, 2009

ITEMIZED RECEIPTS

A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Anheuser Busch Companies, Inc.</u>		<u>5/13/09</u>	<u>\$ 500.00</u>
Mailing Address <u>One Busch Place</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>St. Louis, Missouri</u>		<u>—/—/—</u>	\$
Name of Employer (Required)		<u>—/—/—</u>	\$
Occupation (Required)		Aggregate year-to-date	<u>\$ 500.00</u> ✓
B. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>AT+T Mississippi</u>		<u>9/18/09</u>	<u>\$ 200.00</u>
Mailing Address <u>115 E. Capitol Street, Ste. 702</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Jackson, MS 39201-2135</u>		<u>—/—/—</u>	\$
Name of Employer (Required)		<u>—/—/—</u>	\$
Occupation (Required)		Aggregate year-to-date	<u>\$ 200.00</u> ✓
C. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Entertainment Software Assoc.</u>		<u>9/21/09</u>	<u>\$ 500.00</u>
Mailing Address <u>575 7th St., NW, Ste. 300</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Washington, DC 20004</u>		<u>—/—/—</u>	\$
Name of Employer (Required)		<u>—/—/—</u>	\$
Occupation (Required)		Aggregate year-to-date	<u>\$ 500.00</u> ✓
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Dembury</u>		<u>10/21/09</u>	<u>\$ 500.00</u>
Mailing Address <u>5100 Tennyson Parkway, Ste. 1200</u>		<u>—/—/—</u>	\$
City, State, Zip Code <u>Plano, Texas 75024</u>		<u>—/—/—</u>	\$
Name of Employer (Required)		<u>—/—/—</u>	\$
Occupation (Required)		Aggregate year-to-date	<u>\$ 500.00</u> ✓

Name of Candidate or Committee Rep. Edward Blackmon, Jr. Page 6 of 6
 Reporting period Jan. 1, 2009 through Dec. 31, 2009

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Clean Environment & Fair Taxation/CEFT</u>		<u>12.7.09</u>	\$ <u>200.00</u>
Mailing Address <u>3000-B North State Street</u>		___/___/___	\$
City, State, Zip Code <u>Jackson, MS 39216</u>		___/___/___	\$
Name of Employer (Required)		___/___/___	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>200.00</u> ✓
B. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>PHRMA</u>		<u>12.17.09</u>	\$ <u>500.00</u>
Mailing Address <u>711 N. Street</u>		___/___/___	\$
City, State, Zip Code <u>Baton Rouge, LA 70802</u>		___/___/___	\$
Name of Employer (Required)		___/___/___	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>500.00</u> ✓
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name		___/___/___	\$
Mailing Address		___/___/___	\$
City, State, Zip Code		___/___/___	\$
Name of Employer (Required)		___/___/___	\$
Occupation (Required)		Aggregate year-to-date	\$
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name		___/___/___	\$
Mailing Address		___/___/___	\$
City, State, Zip Code		___/___/___	\$
Name of Employer (Required)		___/___/___	\$
Occupation (Required)		Aggregate year-to-date	\$